

## NEW BLASTER CERTIFICATION AFFIDAVIT

As part of the Montana Blaster Certification Program for new blasters, pursuant to ARM 17.24.1261(2) and (5), please complete the affidavit and application and return them to: Montana Department of Environmental Quality, Industrial & Energy Minerals Bureau, P.O. Box 200901, Helena, MT 59620-0901. You will then be notified of the time, place, and date of examination.

I, the undersigned, hereby certify that I have a minimum of 24 months of blasting experience and have read, studied, and completed the review questions and understand all the material in the document titled, Montana Blaster Certification Training Manual. In addition, I have completed a 24-hour training course meeting the requirements set forth by ARM 17.24.1262 and hereby do attach a verifiable statement indicating such completion.

\_\_\_\_\_  
(Signature of applicant)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Company)

SUBSCRIBED AND SWORN to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public for the State of \_\_\_\_\_

Residing at \_\_\_\_\_

My Commission Expires \_\_\_\_\_